

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J50563

FILED
Jan 31, 2007
Secretary of State

Entity Name: HILTON SELF INSURANCE FUND, INC.

Current Principal Place of Business:

L. CHARLES HILTON JR.
4116 NORTH HIGHWAY 231
PANAMA CITY, FL 324049235 US

New Principal Place of Business:

Current Mailing Address:

L. CHARLES HILTON JR.
4116 HIGHWAY 231
PANAMA CITY, FL 324049235

New Mailing Address:

FEI Number: 59-2753135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILTON, L. CHARLES JR.
4116 NORTH HIGHWAY 231
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HILTON, L. CHARLES JR.
Address: 4116 HIGHWAY 231 NORTH
City-St-Zip: PANAMA CITY, FL 32404

Title: STD () Delete
Name: HUMBLE, ROBERT N
Address: 4116 HIGHWAY 231 NORTH
City-St-Zip: PANAMA CITY, FL 32404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: L. CHARLES HILTON, JR.

PD

01/31/2007

Electronic Signature of Signing Officer or Director

_____ Date